## BEST AVAILABLE CON

PATENT APPLICATION	FEE	<b>BETERMINATION</b>	RECORD
Effective	a Jan	uary 1 2003	

Application or Docket Number

••		CLAIMS AS	FILED -	PART	0.		SÀ	MALL EN	ITITY		OTHER	THAN
(Column 1) (Column 2)							TY	PE		OR	SMALL	
TOTAL CLAIMS		9					RATE	FEE		RATE	FEE .	
FOR		NUMBER F	NUMBER FILED		NUMBER EXTRA		ASIC FEE	375.00	OR	BASIC FEE	750.00	
TOTAL CHARGEABLE CLAIMS 9 minus 20:		us 20=	= *			X\$ 9≕́.		OR	X\$18=			
INDEPENDENT CLAIMS 9 minus 3			us 3 =	*		Γ	X42=.		OR	X84=		
MULTIPLE DEPENDENT CLAIM PRESENT						Γ	+140=		ÓR	+280=		
* If the difference in column 1 is less than zero, enter "0" in column 2				olumn 2	-	TOTAL		OR	TOTAL	750		
CLAIMS AS AMENDED - PART II OTHER THAN										THAN		
10	15-04	(Column 1)		(Colur	nn 2)	(Column 3)		SMALL È	NTITY	OR	SMALL	
ENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER	PRESENT EXTRA	:	RATE	ADDI: TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	• 7	Minus	* 6	0		$\vdash \vdash$	X\$ 9=		OR	X\$18=	
AME	Independent	* 2	Minus	FAID CAD	3	-		X42=		/OR	X84=	
نــا	FIRST PRESE	NTATION OF MU	JLTIPLE DEP	ENDEN	CLAIM			+140=		OR	+280=	
	•			, ,	•		. L	TOTAL		OR	TOTAL	9
						4	AD	DIT. FEE	ا در دو		ADDIT: FEE	
_		(Column·1) CLAIMS		(Colui		(Column 3)					La .	, ye
ENT B		REMAINING AFTER AMENDMENT		NUM ∷PREVI	BÉR OUSLY	PRESENT EXTRA	j L	RATE	ADDI TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**		= .		X\$ 9=		OR	X\$18=	
AMENDMENT	Independent	*	Minus	*** .		=		X42=		OR	X84=	
	FIRST PRESE	NTATION OF ML	OF LIBER DEP	ENDEN	CLAIM			+140=		OR	+280=	
٠				•		•	, <b>L</b> .	TOTAL DIT FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	mn 2) ;	(Column 3)						5.
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		PREVI	BER:	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	0/2/00	=	$\Gamma$	X42=		OR	X84=	
ب	FIRST PRESE	NTATION OF MI	ULTIPLE DEF	ENDEN	LULAIM		1	+140=		OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.												
***	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											